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1. The fee must be paid in full at the time of filing the application.

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Please type a plus sign (+) inside this box →



PTO/SB/05 (08/00)

Approved for use through 09/30/00. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No. <div style="border: 1px solid black; padding: 2px;">21106-707</div>
First Inventor or Application Identifier <div style="border: 1px solid black; padding: 2px;">Zefirov, et al.</div>		Title <div style="border: 1px solid black; padding: 2px;">Agents For Treating Neurodegenerative Disorders</div>
Express Mail Label No. <div style="border: 1px solid black; padding: 2px;">EL 935 749 377 US</div>		

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>	ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input type="checkbox"/> Specification [Total Pages <u> </u>] <i>(preferred arrangement set forth below)</i> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed-Sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Detailed Description of the Drawings - Detailed Description - Claim(s) 4. <input type="checkbox"/> Drawing(s) (37CFR 1.152) [Total Sheets <u> </u>] 5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>6</u>] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> Microfiche Computer Program <i>(Appendix)</i> 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
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ACCOMPANYING APPLICATION PARTS
9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Statement (IDS) PTO-1449 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input checked="" type="checkbox"/> Other: <u>Statement Under 37 CFR §1.10;</u> <u>Original Specification as Filed (96 pages);</u> <u>Substitute Specification (54 pages);</u> <u>Redlined Marked-Up Copy of Substitute Specification (54 pages);</u>

17. **If a CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in a preliminary amendment:
☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. 09/778,662
 Prior application information: Examiner W. Jarvis Group/Art Unit: 1614

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS	
<input checked="" type="checkbox"/> Customer Number or Bar Code Label 021971 or <input type="checkbox"/> Correspondence address below <i>(Insert Customer No. or Attach bar code label here)</i>	
NAME	
ADDRESS	
CITY	STATE
COUNTRY	TELEPHONE
	ZIP CODE
	FAX

Name (Print/Type)	David J. Weitz	Registration No. (Attorney/Agent)	38,362
Signature		Date	January 23, 2002

01/23/02

PTO/SB/17 (6/99)

Approved for use through 09/30/2000. OMB 0651-0032

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 410.00)

Complete if Known

Application Number	Not Yet Assigned
Filing Date	Herewith
First Named Inventor	Zefirov
Examiner Name	Not Yet Assigned
Group/Art Unit	Not Yet Assigned
Attorney Docket Number	21106-707

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 23-2415 (Docket No. 21106-707)

Deposit Account Name Wilson Sonsini Goodrich & Rosati

☒ Charge Any Additional Fee Required
Under 37 CFR §§ 1.16 and 1.17

2. ☐ Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	40.00
146	740	246	370	Filing a submission after final rejection (37 CFR 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify)				25 Request for Corrected Filing Receipt	
Other fee (specify)				55/110 Terminal Disclaimer	

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	370.00
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	
SUBTOTAL (1)					(\$ 370.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
12	-20** = 0	0	0
Independent Claims	2	-3** = 0	0
Multiple Dependent			0

**or number previously paid, if greater; For Reissues, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40.00)

SUBMITTED BY

Name (Print/Type)	David J. Weitz	Registration No. (Attorney/Agent)	38,362	Telephone	650-493-9300
Signature		Date	January 23, 2002	Customer No.	021971

Complete (if applicable)

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
)	
Zefirov, et al.)	Group Art Unit: Not Yet Assigned
)	
Application No. Not Yet Assigned)	Examiner: Not Yet Assigned
)	
Filed: Herewith)	
)	
For: Agent For Treating Neurodegenerative)	
Disorders)	
)	
)	

STATEMENT UNDER 37 C.F.R. 1.10

Box Patent Application
United States Patent and Trademark Office
P.O. Box 2327
Arlington, VA 22202

Sir:

I hereby certify that the attached patent application is being deposited with sufficient postage with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10, Express Mail Label No. EL 935 749 377 US, on January 23, 2002 addressed to Box Patent Application, United States Patent and Trademark Office, P.O. Box 2327, Arlington, VA 22202.

Respectfully submitted,

WILSON SONSINI GOODRICH & ROSATI

Date: Jan. 23, 2002 By: David J. Weitz
David J. Weitz
Registration No. 38,362

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Palo Alto, California 94304
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